

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | SL | | 8-7-01 |
| O.I.P.E. CLASSIFIER | | 8 | 6-20-01 |
| FORMALITY REVIEW | HA | 858 | 5/06/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | |
| Original | |
| 1 | 9-5-02 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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1
 Dec
 20-6-01
 8-6-01